### Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 1 of 48

| Fill in this information to identify your case: |                                 |                                 |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | _                               |                                 |
| Case number (if known)                          | _ Chapter you are filing under: |                                 |
|   | ☐ Chapter 7                     |                                 |
|   | ☐ Chapter 11                    |                                 |
|   | ☐ Chapter 12                    |                                 |
|   | Chapter 13                      | Check if this an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| t 1: Identify Yourself   |   |   |  |
|--|---|---|--|
|  | About Debtor 1:   |   | About Debtor 2 (Spouse Only in a Joint Case):  |
| Your full name   |   |   |  |
| Write the name that is on  | Javier  |   |  |
| your government-issued picture identification (for example, your driver's  | First name  | -   | First name   |
| license or passport).  | Middle name   | -   | Middle name  |
| Bring your picture   | Godinez   |   |  |
| identification to your meeting with the trustee.   | Last name and Suffix (Sr., Jr., II, III)  | -   | Last name and Suffix (Sr., Jr., II, III)   |
| All other names you have used in the last 8 years  | Javier Godinez Calvillo   |   |  |
| Include your married or maiden names.  |   |   |  |
| Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-8526   |   |  |
|  | Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Godinez  Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  About Debtor 1:  Javier  First name  Godinez  Last name and Suffix (Sr., Jr., II, III)  Xxx-xx-8526 | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  All other last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  About Debtor 1:  Javier  First name  Godinez  Last name and Suffix (Sr., Jr., II, III)  Javier Godinez Calvillo  xxx-xx-8526 |

Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 2 of 48 Case number (if known)

Debtor 1 Javier Godinez

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 1. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  EINs  | ☐ I have not used any business name or EINs.  Business name(s)  EINs  |
| 5. | Where you live   |   | If Debtor 2 lives at a different address:   |
|    |  | 1904 Southwick Lane Belvidere, IL 61008-9012  Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code  |
|    |  | Boone<br>County   | County  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  1904 Carly Lane                      | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |
| 6. | Why you are choosing this district to file for bankruptcy  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) |
|    |  |   |   |

Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 3 of 48

Case number (if known) Debtor 1 Javier Godinez

| ar  | t 2: Tell the Court About   | Your E      | Bankruptcy Ca                    | ise                               |   |   |                          |  |
|-----|---|-------------|----------------------------------|-----------------------------------|---|---|--------------------------|--|
| 7.  | The chapter of the<br>Bankruptcy Code you are   |             |                                  |                                   | of each, see <i>Notice Required by</i> f page 1 and check the appropria | v 11 U.S.C. § 342(b) for Individuals Filii<br>ate box.  | ng for Bankruptcy        |  |
|     | choosing to file under  | ☐ Chapter 7 |                                  |                                   |   |   |                          |  |
|     |   |             | Chapter 11                       |                                   |   |   |                          |  |
|     |   |             | Chapter 12                       |                                   |   |   |                          |  |
|     |   |             | Chapter 13                       |                                   |   |   |                          |  |
| 3.  | How you will pay the fee  | •           | about how yo                     | u may pay. Туր<br>attorney is sub | pically, if you are paying the fee y                                    | ck with the clerk's office in your local corourself, you may pay with cash, cashie half, your attorney may pay with a cred        | er's check, or money     |  |
|     |   |             |                                  |                                   |   | ion, sign and attach the Application for  | Individuals to Pay       |  |
|     |   |             | I request that<br>but is not req | t my fee be wa<br>uired to, waive | your fee, and may do so only if y                                       | on only if you are filing for Chapter 7. B<br>our income is less than 150% of the of<br>in installments). If you choose this opti | ficial poverty line that |  |
|     |   |             |                                  |                                   |   | icial Form 103B) and file it with your pe   |                          |  |
| 9.  | Have you filed for bankruptcy within the  | ■ N         |                                  |                                   |   |   |                          |  |
|     | last 8 years?   | □ Y         |                                  |                                   |   |   |                          |  |
|     |   |             | District                         |                                   | When  | Case number   |                          |  |
|     |   |             | District                         |                                   | When  | Case number   |                          |  |
|     |   |             | District                         |                                   | When  | Case number   |                          |  |
| 10. | Are any bankruptcy cases pending or being   | ■ N         | 0                                |                                   |   |   |                          |  |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | □ Y         | es.                              |                                   |   |   |                          |  |
|     |   |             | Debtor                           |                                   |   | Relationship to you   |                          |  |
|     |   |             | District                         |                                   | When  | Case number, if known   |                          |  |
|     |   |             | Debtor                           |                                   |   | Relationship to you   |                          |  |
|     |   |             | District                         |                                   | When  | Case number, if known   |                          |  |
| 11. | Do you rent your residence?   | ПΝ          | o. Go to l                       | ine 12.                           |   |   |                          |  |
|     | residerice:   | Y           | es. Has yo                       | ur landlord obt                   | ained an eviction judgment again  | st you and do you want to stay in your  | residence?               |  |
|     |   |             |                                  | No. Go to line                    | 12.   |   |                          |  |
|     |   |             |                                  | Yes. Fill out Ir. bankruptcy pe   |   | Judgment Against You (Form 101A) a  | nd file it with this     |  |
|     |   |             |                                  |                                   |   |   |                          |  |

Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02

Case 17-80446 Desc Main Document Page 4 of 48 Case number (if known) **Javier Godinez** Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? ☐ Yes. Name and location of business A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

| INO. |  |
|------|--|
|      |  |
|      |  |

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Javier Godinez

Document Page 5 of 48

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

|  |  | pa |  |
|--|--|----|--|
|  |  |    |  |
|  |  |    |  |

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

| I received a briefing from an approved credit             |
|---|
| counseling agency within the 180 days before I filed      |
| this bankruptcy petition, and I received a certificate of |
| completion.   |

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 48 Case number (if known) Debtor 1 **Javier Godinez** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Javier Godinez Signature of Debtor 2 **Javier Godinez** Signature of Debtor 1 Executed on February 28, 2017 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Javier Godinez

Document Page 7 of 48

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Joseph P. Doyle                 |              | Date          | February 28, 2017  |  |
|-------------------------------------|--------------|---------------|--------------------|--|
| Signature of Attorney for D         | ebtor        |               | MM / DD / YYYY     |  |
|                                     |              |               |                    |  |
| Joseph P. Doyle                     |              |               |                    |  |
| Printed name                        |              |               |                    |  |
| Law Office of Joseph                | P. Doyle LLC |               |                    |  |
| Firm name                           |              |               |                    |  |
| 105 S. Roselle Road, S              | Suite 203    |               |                    |  |
| Schaumburg, IL 60193                |              |               |                    |  |
| Number, Street, City, State & ZIP C | ode          |               |                    |  |
| Contact phone <b>847-985-11</b>     | 00           | Email address | joe@fightbills.com |  |
| 6277393                             |              |               |                    |  |
| Bar number & State                  |              |               |                    |  |

|                    |                          | Docume            | ent Page 8 of 48 |  |
|--------------------|--------------------------|-------------------|------------------|--|
| Fill in this infor | mation to identify your  | case:             |                  |  |
| Debtor 1           | Javier Godinez           |                   |                  |  |
|                    | First Name               | Middle Name       | Last Name        |  |
| Debtor 2           |                          |                   |                  |  |
| Spouse if, filing) | First Name               | Middle Name       | Last Name        |  |
| Jnited States Ba   | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |  |
| Case number        |                          |                   |                  |  |
| if known)          |                          |                   |                  |  |
|                    |                          |                   |                  |  |

Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | t1: Summarize Your Assets  |                    |                                |
|-----|--|--------------------|--------------------------------|
|     |  | Your a<br>Value of | ssets<br>of what you own       |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$                 | 0.00                           |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$                 | 16,925.00                      |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$                 | 16,925.00                      |
| Par | t 2: Summarize Your Liabilities  |                    |                                |
|     |  |                    | <b>abilities</b><br>It you owe |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$                 | 16,257.00                      |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$                 | 0.00                           |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$                 | 1,393.00                       |
|     | Your total liabilities   | \$                 | 17,650.00                      |
| Par | t 3: Summarize Your Income and Expenses  |                    |                                |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$                 | 2,134.00                       |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$                 | 1,728.00                       |
| Par | 4: Answer These Questions for Administrative and Statistical Records   |                    |                                |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ır other sch       | hedules.                       |
| 7.  | ■ Yes What kind of debt do you have?   |                    |                                |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a   | a personal,        | , family, or                   |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Case 17-80446 Document

Page 9 of 48 Case number (if known) Debtor 1 Javier Godinez

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,788.68 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total cla | im   |
|--|-----------|------|
| From Part 4 on Schedule E/F, copy the following:   |           |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$        | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$        | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$        | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$        | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$        | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$       | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$        | 0.00 |

Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 10 of 48 Case 17-80446 Doc 1

| this info  | ormation to identify your  | case and th  | is filing:   |  |   |   |  |
|--|--|--|--|--|---|---|--|
| · 1  | Javier Godinez   |  |  |  |   |   |  |
| . ^  | First Name   | Middle   | Name   | Last Name  |   |   |  |
|  | First Name   | Middle   | Name   | Last Name  |   |   |  |
| States E   | Bankruptcy Court for the:  | NORTHER  | N DISTRICT OF  | FILLINOIS  |   |   |  |
| numbor   |  |  |  |  |   |   | П о  |
| lullibei   |  |  |  |  |   |   | Check if this is an amended filing   |
|  |  |  |  |  |   |   | J  |
| ial F  | orm 106A/B   |  |  |  |   |   |  |
|  | _  | ertv   |  |  |   |   | 12/15  |
| category<br>fits best.<br>tion. If mo<br>every qu                                    | , separately list and describ<br>Be as complete and accura<br>ore space is needed, attach<br>lestion.  | be items. List a<br>ate as possible<br>n a separate sh   | e. If two married<br>neet to this form.  | people are filing together, both a<br>On the top of any additional pag   | re equally responsi   | ble for sup   | oplying correct  |
|  |  |  |  |  |   |   |  |
| o Go to B  | Port 2   |  |  |  |   |   |  |
|  |  |  |  |  |   |   |  |
| _  | ,  |  |  |  |   |   |  |
| Describ  | pe Your Vehicles   |  |  |  |   |   |  |
| ne else d  | invoo. Ii you loudo a voillo   | ਸਦ, aiso repor   | t it on <i>Schedule</i>  | G: Executory Contracts and U   | Inexpired Leases.   |   |  |
|  | trucks, tractors, sport ut   | •  |  | •  | Inexpired Leases.   |   |  |
| <b>s, vans,</b><br>0   | •  | itility vehicles   | s, motorcycles   | •  | Do not deduct :   |   | nims or exemptions. Put  |
| s, vans,<br>o<br>es  | trucks, tractors, sport un  Nissan  Pathfinder   | itility vehicles   | s, motorcycles no has an interes Debtor 1 only   |  | Do not deduct the amount of a   | any secured   | nims or exemptions. Put<br>d claims on <i>Schedule D:</i><br>ns <i>Secured by Property.</i>  |
| s, vans,<br>o<br>es<br>Make:<br>Model:<br>Year:                                      | Nissan Pathfinder  | wh   | no has an interes Debtor 1 only Debtor 2 only  | at in the property? Check one  | Do not deduct the amount of a Creditors Who   | any secured<br>Have Clain<br>of the   | d claims on Schedule D: ns Secured by Property.  Current value of the  |
| s, vans,<br>0<br>es<br>Make:<br>Model:<br>Year:<br>Approxim                          | Nissan Pathfinder 2013 nate mileage:   | who have a second secon | no has an interes Debtor 1 only Debtor 2 only Debtor 1 and Det   | at in the property? Check one otor 2 only  | Do not deduct the amount of a Creditors Who   | any secured<br>Have Clain<br>of the   | d claims on Schedule D:<br>ns Secured by Property.   |
| s, vans,<br>0<br>es<br>Make:<br>Model:<br>Year:<br>Approxim                          | Nissan Pathfinder 2013 hate mileage: ormation: - Full Coverage Auto  | who whicles  | no has an interes Debtor 1 only Debtor 2 only Debtor 1 and Det At least one of the   | at in the property? Check one  | Do not deduct the amount of a Creditors Who Current value entire property   | any secured<br>Have Clain<br>of the   | d claims on Schedule D: ns Secured by Property.  Current value of the  |
| s, vans, o es Make: Model: Year: Approxim Other info In Plan Insurar ercraft, o o es | Nissan Pathfinder 2013 nate mileage: ormation: - Full Coverage Autonce aircraft, motor homes, Apats, trailers, motors, personations, personations, motors, motors, personations, motors, motor | When the transfer of the trans | no has an interes Debtor 1 only Debtor 2 only Debtor 1 and Det At least one of the Check if this is of (see instructions)  her recreational aft, fishing vesses all of your entinumber here  | otor 2 only e debtors and another community property  I vehicles, other vehicles, and els, snowmobiles, motorcycle a   | Do not deduct the amount of a Creditors Who Current value entire property \$15,5  d accessories ccessories  | any secured Have Claim of the y?  | d claims on Schedule D:<br>ns Secured by Property.  Current value of the<br>portion you own?   |
| r in the second  | r 1 r 2 r, if filing) I States I number  Cial F  Category fits best. Intion. If m r every qu Descrit rou own o   | Javier Godinez First Name  T 2 First Name  States Bankruptcy Court for the: number  Cial Form 106A/B  Pedule A/B: Prop  category, separately list and descrit fits best. Be as complete and accuration. If more space is needed, attach every question.  Describe Each Residence, Building ou own or have any legal or equitable to. Go to Part 2.  Es. Where is the property?  Describe Your Vehicles   | r 1  Javier Godinez  First Name  Middle  R 2  First Name  Middle  R States Bankruptcy Court for the:  NORTHER  NORTHER | First Name Middle Name  T 2  To property  Cial Form 106A/B  Dedule A/B: Property  Category, separately list and describe items. List an asset only one fits best. Be as complete and accurate as possible. If two married ation. If more space is needed, attach a separate sheet to this form. The every question.  Describe Each Residence, Building, Land, or Other Real Estate You own or have any legal or equitable interest in any residence, but lo. Go to Part 2.  Es. Where is the property?  Describe Your Vehicles | First Name Middle Name Last Name  r 2 g, if filing) First Name Middle Name Last Name  d States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  number  Cial Form 106A/B  nedule A/B: Property  category, separately list and describe items. List an asset only once. If an asset fits in more than of fits best. Be as complete and accurate as possible. If two married people are filing together, both a fittion. If more space is needed, attach a separate sheet to this form. On the top of any additional page every question.  Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In ou own or have any legal or equitable interest in any residence, building, land, or similar property?  lo. Go to Part 2.  es. Where is the property?  Describe Your Vehicles | First Name Middle Name Last Name  T 2  Out of filling)  First Name Middle Name Last Name  A States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  CIAI Form 106A/B  Dedule A/B: Property  Category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsition. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name every question.  Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In  Ou own or have any legal or equitable interest in any residence, building, land, or similar property?  Describe Your Vehicles | First Name Middle Name Last Name  States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Inumber  Cial Form 106A/B  Dedule A/B: Property  Category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in this best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for support of the space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case every question.  Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In the property?  To Go to Part 2.  The ses. Where is the property? |

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Schedule A/B: Property

Official Form 106A/B

Page 12 of 48

Case number (if known) Debtor 1 **Javier Godinez** Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes Cash on Hand \$25.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **Checking account with Alpine Bank** \$100.00 17.1. Checking account with USAA \$0.00 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... Official Form 106A/B Schedule A/B: Property page 3

|     |                           | Case 1                          | .7-80446  | Doc 1                       | Filed 02/28/17<br>Document                           | Entered 02/28/17 21:37:02<br>Page 13 of 48          | Desc Main   |
|-----|---------------------------|---------------------------------|---|-----------------------------|--|---|---|
| De  | ebtor 1                   | Javier Go                       | odinez  |                             | Document   | Case number (if known)                              |   |
|     | ■ No                      | -                               | r future intere                                   |                             | rty (other than anythin                              | g listed in line 1), and rights or powers exe       | rcisable for your benefit   |
|     | Exam <sub>i</sub><br>■ No | ples: Internet                  | •   | , websites, pr              | ts, and other intellecturoceeds from royalties a     | al property<br>nd licensing agreements              |   |
|     | Exam <sub>i</sub> ■ No    | ples: Building                  | es, and other permits, exclu                      | sive licenses,              |  | n holdings, liquor licenses, professional license   | es  |
| M   | oney or                   | property ow                     | ed to you?  |                             |  |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|     | ■ No                      | funds owed                      | -   | oout them, inc              | luding whether you alrea                             | ady filed the returns and the tax years             |   |
|     | Exam <sub>i</sub> ■ No    |                                 | e or lump sum                                     |                             | ısal support, child suppo                            | ort, maintenance, divorce settlement, property      | settlement  |
|     | Exam <sub>i</sub> ■ No    | ples: Unpaid<br>benefits        | meone owes y<br>wages, disabilit<br>c information | y insurance p               |  | efits, sick pay, vacation pay, workers' compen      | sation, Social Security   |
| 31. | Exam <sub>i</sub>         | sts in insura<br>pples: Health, |   | insurance; h                | ealth savings account (I                             | HSA); credit, homeowner's, or renter's insuran      | ce  |
|     | ■ No<br>□ Yes.            | . Name the in                   |   | ny of each po<br>pany name: | olicy and list its value.                            | Beneficiary:  | Surrender or refund value:  |
|     | If you somed              | are the benefone has died.      |   |                             | someone who has die<br>t proceeds from a life in     | d surance policy, or are currently entitled to rece | ive property because  |
|     | Exam <sub>i</sub><br>■ No | ples: Acciden                   |   |                             | rou have filed a lawsui<br>surance claims, or rights | t or made a demand for payment<br>to sue            |   |
|     | ■ No                      |                                 | nd unliquidate                                    | ed claims of                | every nature, including                              | g counterclaims of the debtor and rights to         | set off claims  |
|     | ■ No                      |                                 | ts you did not                                    | already list                |  |   |   |

Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 14 of 48

| Javier Godinez   |                                    | Case number (if known)       |             |
|--|------------------------------------|------------------------------|-------------|
| 36. Add the dollar value of all of your entries from Part 4, in for Part 4. Write that number here   |                                    |                              | \$125.00    |
| Part 5: Describe Any Business-Related Property You Own or Have   | an Interest In. List any real esta | ate in Part 1.               |             |
| 7. Do you own or have any legal or equitable interest in any busine  | ss-related property?               |                              |             |
| No. Go to Part 6.  |                                    |                              |             |
| Yes. Go to line 38.  |                                    |                              |             |
| Part 6: Describe Any Farm- and Commercial Fishing-Related Proposition of you own or have an interest in farmland, list it in Part 1.   | erty You Own or Have an Interes    | st In.                       |             |
| 6. Do you own or have any legal or equitable interest in any   | y farm- or commercial fishir       | ng-related property?         |             |
| No. Go to Part 7.  |                                    |                              |             |
| ☐ Yes. Go to line 47.  |                                    |                              |             |
| Part 7: Describe All Property You Own or Have an Interest in   | That You Did Not List Above        |                              |             |
| <ul> <li>3. Do you have other property of any kind you did not alreat Examples: Season tickets, country club membership</li> <li>■ No</li> <li>□ Yes. Give specific information</li> </ul> | ady list?                          |                              |             |
| 54. Add the dollar value of all of your entries from Part 7. V   | Vrite that number here             |                              | \$0.00      |
| Part 8: List the Totals of Each Part of this Form  |                                    |                              |             |
| 55. Part 1: Total real estate, line 2  |                                    |                              | \$0.00      |
| 56. Part 2: Total vehicles, line 5   | \$15,500.00                        |                              |             |
| 57. Part 3: Total personal and household items, line 15  | \$1,300.00                         |                              |             |
| 58. Part 4: Total financial assets, line 36  | \$125.00                           |                              |             |
| 59. Part 5: Total business-related property, line 45   | \$0.00                             |                              |             |
| 60. Part 6: Total farm- and fishing-related property, line 52  | \$0.00                             |                              |             |
| 61. Part 7: Total other property not listed, line 54   | + \$0.00                           |                              |             |
| 62. <b>Total personal property.</b> Add lines 56 through 61  | \$16,925.00                        | Copy personal property total | \$16,925.00 |
|  |                                    |                              |             |

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$16,925.00

|                        |                          | 1700.000          | 111 FAUE 1.3 UL40 |                       |
|------------------------|--------------------------|-------------------|-------------------|-----------------------|
| Fill in this infor     | mation to identify your  | case:             |                   |                       |
| Debtor 1               | Javier Godinez           |                   |                   |                       |
|                        | First Name               | Middle Name       | Last Name         |                       |
| Debtor 2               |                          |                   |                   |                       |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name         |                       |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS       |                       |
| Case number (if known) |                          |                   |                   | ☐ Check if this is an |
|                        |                          |                   |                   | amended filing        |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the<br>portion you own | Amo | ount of the exemption you claim                                 | Specific laws that allow exemption |
|--|---|-----|---|------------------------------------|
|  | Copy the value from<br>Schedule A/B     | Che | ck only one box for each exemption.                             |                                    |
| 2013 Nissan Pathfinder V-6 miles<br>In Plan - Full Coverage Auto                       | \$15,500.00                             |     | \$2,400.00  | 735 ILCS 5/12-1001(c)              |
| Insurance Line from Schedule A/B: 3.1  |   |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Miscellaneous used household goods and furnishings                                     | \$300.00                                |     | \$300.00  | 735 ILCS 5/12-1001(b)              |
| Line from Schedule A/B: 6.1  |   |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| TVs and computers  | \$200.00                                |     | \$200.00  | 735 ILCS 5/12-1001(b)              |
| Ellie II olii ochodale 74 b. 111   |   |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Books, Pictures, and CD's  | \$200.00                                |     | \$200.00  | 735 ILCS 5/12-1001(b)              |
| Ellie IIIIII Schedule PAB. V.1   |   |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Wearing Apparel Line from Schedule A/B: 11.1   | \$400.00                                |     | \$400.00  | 735 ILCS 5/12-1001(a)              |
| Line Holli Schedule A/D. 1111  |   |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Line from Scriedule A/B. 11.1  |   |     | · •   |                                    |

Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 16 of 48 Case number (if known)

|      |  |                                      |         | ` ,   |                                    |
|------|--|--------------------------------------|---------|---|------------------------------------|
|      | description of the property and line on edule A/B that lists this property | Current value of the portion you own | Amo     | ount of the exemption you claim                                 | Specific laws that allow exemption |
|      |  | Copy the value from<br>Schedule A/B  | Che     | ck only one box for each exemption.                             |                                    |
|      | cellaneous Costume Jewelry from Schedule A/B: 12.1                         | \$200.00                             |         | \$200.00  | 735 ILCS 5/12-1001(b)              |
| LINE | HOIII Scriedule PAB. 12.1  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
|      | h on Hand<br>from Schedule A/B: 16.1                                       | \$25.00                              |         | \$25.00   | 735 ILCS 5/12-1001(b)              |
| Line | Irom Schedule A/B. 10.1  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
|      | ecking account with Alpine Bank from Schedule A/B: 17.1                    | \$100.00                             |         | \$100.00  | 735 ILCS 5/12-1001(b)              |
| Line | Irom Schedule A/B. 17.1  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
|      | you claiming a homestead exemption ject to adjustment on 4/01/19 and every |                                      |         | led on or after the date of adjustme                            | nt.)                               |
|      | Yes. Did you acquire the property cover ☐ No                               | ed by the exemption wi               | ithin 1 | ,215 days before you filed this case                            | ?                                  |

Yes

| Case                                 | 17-80446                       | Doc 1           | Filed 02/28/17<br>Document                                       | Entered<br>Page 17 | d 02/28/17 21:3<br>of 48                               | 7:02 Desc<br>-                               | : Main                   |
|--------------------------------------|--------------------------------|-----------------|--|--------------------|--|--|--------------------------|
| Fill in this information             | on to identify you             | ır case:        |  |                    |  |  |                          |
|                                      | Javier Godinez<br>irst Name    | Mic             | ddle Name  | Last Name          |  |  |                          |
| Debtor 2<br>(Spouse if, filing)      | irst Name                      | Mic             | ddle Name  | Last Name          |  |  |                          |
| United States Bankru                 | ptcy Court for the             | : NORTH         | HERN DISTRICT OF ILL   | INOIS              |  |  |                          |
| Case number                          |                                |                 |  |                    |  | ☐ Che  | eck if this is an        |
|                                      |                                |                 |  |                    |  | ame  | ended filing             |
| Official Form 1 Schedule D:          |                                | s Who I         | Have Claims \$   | Secured            | l by Property  | ,  | 12/15                    |
|                                      |                                |                 | ed people are filing togethe<br>the entries, and attach it t     |                    |  |  |                          |
| I. Do any creditors have             | e claims secured by            | y your prope    | rty?   |                    |  |  |                          |
| □ No. Check this                     | s box and submit t             | his form to t   | he court with your other   | schedules. Yo      | u have nothing else to                                 | report on this form                          | ١.                       |
| Yes. Fill in all                     | of the information             | below.          |  |                    |  |  |                          |
|                                      | cured Claims                   |                 |  |                    |  |  |                          |
| <u> </u>                             |                                | more than on    | e secured claim, list the cred                                   | ditor senarately   | Column A   | Column B                                     | Column C                 |
| for each claim. If more t            | han one creditor has           | a particular    | claim, list the other creditors<br>ording to the creditor's name | in Part 2. As      | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Nissan Motor                     | Acceptanc                      | Describe t      | he property that secures the                                     | he claim:          | \$16,257.00  | \$15,500.0                                   | 0 \$757.00               |
| Creditor's Name                      |                                |                 | ssan Pathfinder V-6 r<br>Full Coverage Auto<br>ce                |                    |  |  |                          |
| Po Box 66030<br>Dallas, TX 75        |                                | apply.  Conting |  | Check all that     |  |  |                          |
| Number, Street, City,                | State & Zip Code               | Unliquio        |  |                    |  |  |                          |
| Who owes the debt?                   | Check one                      | ☐ Dispute       | d lien. Check all that apply.                                    |                    |  |  |                          |
| Debtor 1 only Debtor 2 only          | Official official              | _               | ement you made (such as n  | nortgage or sec    | ured   |  |                          |
| Debtor 1 and Debtor                  | 2 only                         | ☐ Statutor      | ry lien (such as tax lien, med                                   | chanic's lien)     |  |  |                          |
| At least one of the de               | ebtors and another             | ☐ Judgme        | ent lien from a lawsuit  |                    |  |  |                          |
| ☐ Check if this claim community debt | relates to a                   | Other (i        | ncluding a right to offset)                                      | Purchase N         | Ioney Security   |  |                          |
|                                      | Opened<br>03/13 Last<br>Active |                 |  | ner 0001           |  |  |                          |
| Date debt was incurred               | 3/22/16                        | Las             | t 4 digits of account numb                                       | er Juui            |  |  |                          |

Add the dollar value of your entries in Column A on this page. Write that number here: \$16,257.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$16,257.00

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|                                  |  |  | Document   | Page 1                        | 8 of 48   |                                      |
|----------------------------------|--|--|--|-------------------------------|---|--------------------------------------|
| Filli                            | n this infor   | mation to identify your  | case:  |                               |   |                                      |
| Deb                              | tor 1  | Javier Godinez   |  |                               |   |                                      |
|                                  |  | First Name   | Middle Name  | Last Name                     |   |                                      |
|                                  | tor 2  | First Name   | Middle Nome  | Loot Name                     |   |                                      |
| (Spou                            | ise if, filing)  | First Name   | Middle Name  | Last Name                     |   |                                      |
| Unite                            | ed States Ba   | nkruptcy Court for the:  | NORTHERN DISTRICT OF IL  | LINOIS                        |   |                                      |
| Casi                             | e number   |  |  |                               |   |                                      |
| (if kno                          | _  |  |  |                               |   | Check if this is an                  |
|                                  |  |  |  |                               |   | amended filing                       |
| ~ · · ·                          | –  | 4005/5   |  |                               |   |                                      |
|                                  |  | n 106E/F   |  |                               |   |                                      |
| Sch                              | <u>nedule E</u>  | :/F: Creditors W   | ho Have Unsecured  | Claims                        |   | 12/15                                |
| Sched<br>Sched<br>eft. A<br>name | dule G: Execu<br>dule D: Credit<br>attach the Cor<br>and case nu | ntory Contracts and Unexpors Who Have Claims Secutinuation Page to this page to the page t | oired Leases (Official Form 106G). I<br>ured by Property. If more space is<br>ge. If you have no information to re | Do not include needed, copy t | contracts on Schedule A/B: Property (Offi<br>any creditors with partially secured claim<br>the Part you need, fill it out, number the e<br>do not file that Part. On the top of any add | ns that are listed in entries in the |
| Part                             |  | II of Your PRIORITY Ur   |  |                               |   |                                      |
|                                  | •  | ors have priority unsecure   | d claims against you?  |                               |   |                                      |
| _                                | No. Go to F  | Part 2.  |  |                               |   |                                      |
|                                  | Yes.   | " ( ) NONDO DE LA CONTRACTION  |  |                               |   |                                      |
| Part                             |  | II of Your NONPRIORIT  |  |                               |   |                                      |
|                                  | _  |  | cured claims against you?  |                               |   |                                      |
| I                                | ☐ No. You ha   | ve nothing to report in this p   | eart. Submit this form to the court with   | your other sche               | edules.   |                                      |
| ı                                | Yes.   |  |  |                               |   |                                      |
| ι                                | unsecured clai   | m, list the creditor separatel   | y for each claim. For each claim lister  | d, identify what t            | o holds each claim. If a creditor has more the type of claim it is. Do not list claims already in   | ncluded in Part 1. If more           |
|                                  | han one credit<br>Part 2.  | or holds a particular claim, I   | ist the other creditors in Part 3.If you   | have more than                | three nonpriority unsecured claims fill out th  | e Continuation Page of               |
|                                  |  |  |  |                               |   | Total claim                          |
| 4.1                              | Atg Cre  | edit I Ic  | Last 4 digits of acc   | count number                  | 8165  | \$114.00                             |
|                                  |  | y Creditor's Name  |  |                               |   |                                      |
|                                  |  | Cortland St  |  |                               | Opened 10/15 Last Active  |                                      |
|                                  | Ste 2  | o, IL 60622  | When was the deb   | t incurred?                   | 05/13   | _                                    |
|                                  |  | treet City State Zlp Code  | As of the date you   | file, the claim i             | is: Check all that apply  |                                      |
|                                  | Who incu   | rred the debt? Check one.  |  |                               |   |                                      |
|                                  | ■ Debto  | 1 only   | ☐ Contingent   |                               |   |                                      |
|                                  | ☐ Debtor   | 2 only   | ☐ Unliquidated   |                               |   |                                      |
|                                  | ☐ Debto  | 1 and Debtor 2 only  | ☐ Disputed   |                               |   |                                      |
|                                  |  | st one of the debtors and an   | other Type of NONPRIO  | RITY unsecured                | d claim:  |                                      |
|                                  |  | if this claim is for a com   | □ - · · ·  |                               |   |                                      |
|                                  | debt   |  | ☐ Obligations arisi  |                               | aration agreement or divorce that you did not   |                                      |
|                                  | _  | im subject to offset?  | report as priority cla   |                               |   |                                      |
|                                  | No   |  | ·  | •                             | ng plans, and other similar debts   |                                      |
|                                  | ☐ Yes  |  | Other. Specify   | Collection                    | Attorney Radiology Consu  | _                                    |
|                                  |  |  |  |                               |   |                                      |

| Debto | Javier Godinez  | Document Page 1   | 9 0T 48<br>Case number (if know)              |          |
|-------|---|---|---|----------|
| 4.2   | Fingerhut Nonpriority Creditor's Name   | Last 4 digits of account number   | 6335  | \$424.00 |
|       | 6250 Ridgewood Rd<br>St Cloud, MN 56303   | When was the debt incurred?   | Opened 11/15 Last Active 07/16                |          |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.                   | As of the date you file, the claim  | is: Check all that apply                      |          |
|       | ■ Debtor 1 only   | ☐ Contingent  |   |          |
|       | Debtor 2 only   | ☐ Unliquidated  |   |          |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed  |   |          |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured   | d claim:                                      |          |
|       | ☐ Check if this claim is for a community  | Student loans   |   |          |
|       | debt Is the claim subject to offset?  | <ul> <li>Obligations arising out of a sepa<br/>report as priority claims</li> </ul> | aration agreement or divorce that you did not |          |
|       | ■ No  | Debts to pension or profit-sharing  | ng plans, and other similar debts             |          |
|       | Yes   | ■ Other. Specify Charge Acc   | count   |          |
| 4.3   | Guyer & Enichen, P.C.   | Last 4 digits of account number   | 6D62  | \$0.00   |
|       | Nonpriority Creditor's Name Adrian C. Phillips 2601 Reid Farm Road Rockford, IL 61114 | When was the debt incurred?   | 2016  |          |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.                  | As of the date you file, the claim  | is: Check all that apply                      |          |
|       | Debtor 1 only   | ☐ Contingent  |   |          |
|       | Debtor 2 only   | ☐ Unliquidated  |   |          |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |   |          |
|       | At least one of the debtors and another   | Type of NONPRIORITY unsecured   | d claim:                                      |          |
|       | ☐ Check if this claim is for a community  | ☐ Student loans   |   |          |
|       | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims                          | aration agreement or divorce that you did not |          |
|       | ■ No  | ☐ Debts to pension or profit-sharin   | ng plans, and other similar debts             |          |
|       | ☐ Yes   | Other. Specify Notice only  | wife's divorce attorney                       |          |
| 4.4   | Portfolio Recovery  | Last 4 digits of account number   | 8935  | \$855.00 |
|       | Nonpriority Creditor's Name   | _   |   | ·        |
|       | Po Box 41067<br>Norfolk, VA 23541   | When was the debt incurred?   | Opened 04/16 Last Active 07/15                |          |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.                  | As of the date you file, the claim  | is: Check all that apply                      |          |
|       | Debtor 1 only   | ☐ Contingent  |   |          |
|       | ☐ Debtor 2 only   | ☐ Unliquidated  |   |          |
|       | ☐ Debtor 1 and Debtor 2 only  | Disputed  |   |          |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured   | d claim:                                      |          |
|       | ☐ Check if this claim is for a community  | ☐ Student loans   |   |          |
|       | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims                          | aration agreement or divorce that you did not |          |
|       | No.   | Debts to pension or profit-sharin   | ng plans, and other similar debts             |          |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Bank

**Factoring Company Account Comenity** 

☐ Yes

Other. Specify

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Page 20 of 48 Case number (if know) Document

Debtor 1 Javier Godinez

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       |     |   |     | Т  | otal Claim |
|-----------------------|-----|---|-----|----|------------|
|                       | 6a. | Domestic support obligations  | 6a. | \$ | 0.00       |
| Total                 |     |   |     |    |            |
| claims<br>from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00       |
|                       | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00       |
|                       | 6d. | <b>Other.</b> Add all other priority unsecured claims. Write that amount here.                          | 6d. | \$ | 0.00       |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00       |
|                       |     |   |     | Т  | otal Claim |
|                       | 6f. | Student loans   | 6f. | \$ | 0.00       |
| Total claims          |     |   |     |    |            |
| from Part 2           | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00       |
|                       | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$ | 0.00       |
|                       | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 1,393.00   |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 1,393.00   |

|                     |                          | 1700.111115       | III FAUE / I UI 40 |  |
|---------------------|--------------------------|-------------------|--------------------|--|
| Fill in this infor  | mation to identify your  | case:             |                    |  |
| Debtor 1            | Javier Godinez           |                   |                    |  |
|                     | First Name               | Middle Name       | Last Name          |  |
| Debtor 2            |                          |                   |                    |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name          |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS        |  |
| Case number         |                          |                   |                    |  |
| (if known)          |                          |                   |                    |  |
|                     |                          |                   |                    |  |

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company wit | h whom you have the o | contract or lease | State what the contract or lease is for |
|-----|-----------|-------------|-----------------------|-------------------|---|
| 2.1 |           |             |                       |                   |   |
|     | Name      |             |                       |                   | _                                       |
|     | Number    | Street      |                       |                   |   |
|     | City      |             | State                 | ZIP Code          |   |
| 2.2 |           |             |                       |                   | _                                       |
|     | Name      |             |                       |                   |   |
|     | Number    | Street      |                       |                   | _                                       |
|     | City      |             | State                 | ZIP Code          | <del>_</del>                            |
| 2.3 |           |             |                       |                   |   |
|     | Name      |             |                       |                   |   |
|     | Number    | Street      |                       |                   | _                                       |
|     | City      |             | State                 | ZIP Code          | _                                       |
| 2.4 | •         |             |                       |                   |   |
|     | Name      |             |                       |                   | _                                       |
|     | Number    | Street      |                       |                   | _                                       |
|     | City      |             | State                 | ZIP Code          |   |
| 2.5 | •         |             |                       |                   |   |
|     | Name      |             |                       |                   | _                                       |
|     | Number    | Street      |                       |                   | _                                       |
|     | City      |             | State                 | ZIP Code          | <del>_</del>                            |
|     | Jity      |             | Ciaio                 |                   |   |

|                            |   | Document                           | Page 22 of 48                |  |
|----------------------------|---|------------------------------------|------------------------------|--|
| Fill in thi                | is information to identify your                                     | case:                              |                              |  |
| Debtor 1                   | Javier Godinez  |                                    |                              |  |
| Dahtar 0                   | First Name  | Middle Name                        | Last Name                    |  |
| Debtor 2<br>(Spouse if, f  |   | Middle Name                        | Last Name                    |  |
| United St                  | tates Bankruptcy Court for the:                                     | NORTHERN DISTRICT OF I             | LLINOIS                      |  |
| Case nur                   | mber  |                                    |                              |  |
| (if known)                 |   |                                    |                              | ☐ Check if this is an amended filing   |
| Officia                    | al Form 106H  |                                    |                              |  |
| Sche                       | dule H: Your Cod  | ebtors                             |                              | 12/15  |
| 1. Do □ No ■ Ye 2. W Arizo | es  | you are filing a joint case, do no | y state or territory? (Commι | unity property states and territories include  |
|                            | es. Did your spouse, former spou                                    | use, or legal equivalent live with | you at the time?             |  |
| in lir<br>Forn             | ne 2 again as a codebtor only i                                     | f that person is a guarantor o     | r cosigner. Make sure you h  | ouse is filing with you. List the person shown<br>ave listed the creditor on Schedule D (Official<br>chedule D, Schedule E/F, or Schedule G to fill  |
|                            | Column 1: Your codebtor<br>Name, Number, Street, City, State and ZI | IP Code                            |                              | n 2: <b>The creditor to whom you owe the debt</b> all schedules that apply:  |
| 3.1                        | Refugio Avila<br>1904 Carly Lane<br>Belvidere, IL 61008-9012        |                                    | □ Sch<br>□ Sch               | nedule D, linenedule E/F, linenedule Gnedule G |

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# Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 23 of 48

| Fill               | in this information to identify your c   | asa.                          |  |                        |             |                               |                          |                              |                 |
|--------------------|--|-------------------------------|--|------------------------|-------------|-------------------------------|--------------------------|------------------------------|-----------------|
|                    | otor 1 Javier Godi   |                               |  |                        |             |                               |                          |                              |                 |
|                    | otor 2 use, if filing)   |                               |  |                        | _           |                               |                          |                              |                 |
| Uni                | ted States Bankruptcy Court for the  | : NORTHERN DISTRIC            | CT OF ILLINOIS                         |                        | _           |                               |                          |                              |                 |
|                    | se number<br>  |                               | -                                      |                        |             |                               | ed filing<br>ent showin  | ng postpetition              |                 |
| O                  | fficial Form 106I  |                               |  |                        |             | MM / DD/ Y                    |                          | ollowing date.               |                 |
|                    | chedule I: Your Inc  | ome                           |  |                        |             | IVIIVI / DD/ 1                | 1111                     |                              | 12/15           |
| sup<br>spo<br>atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment | are married and not filing wi | ng jointly, and your                   | spouse i<br>ude inforr | s living wi | ith you, incl<br>out your spe | ude inforr<br>ouse. If m | nation about<br>ore space is | your<br>needed, |
| 1.                 | Fill in your employment information.   |                               | Debtor 1                               |                        |             | Debtor 2                      | 2 or non-fi              | iling spouse                 |                 |
|                    | If you have more than one job, attach a separate page with information about additional  | Employment status             | ■ Employed □ Not employed              |                        |             | ☐ Empl                        | oyed<br>mployed          |                              |                 |
|                    | employers.   | Occupation                    | Truck Driver                           |                        |             |                               |                          |                              |                 |
|                    | Include part-time, seasonal, or self-employed work.  | Employer's name               | Independent C<br>Driver                |                        |             |                               |                          |                              |                 |
|                    | Occupation may include student or homemaker, if it applies.  | Employer's address            | 1904 Carly Lane<br>Belvidere, IL 61008 |                        |             |                               |                          |                              |                 |
|                    |  | How long employed t           | here? 2 year                           | s                      |             |                               |                          |                              |                 |
| Par                | t 2: Give Details About Mor  | nthly Income                  |  |                        |             |                               |                          |                              |                 |
|                    | mate monthly income as of the duse unless you are separated.   | ate you file this form. If    | you have nothing to                    | report for             | any line, w | rite \$0 in the               | space. In                | clude your no                | n-filing        |
|                    | u or your non-filing spouse have mo<br>e space, attach a separate sheet to   |                               | ombine the information                 | on for all e           | mployers f  | for that perso                | on on the li             | nes below. If                | you need        |
|                    |  |                               |  |                        | For I       | Debtor 1                      |                          | btor 2 or<br>ing spouse      |                 |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,   |                               |  | 2.                     | \$          | 0.00                          | \$                       | N/A                          |                 |
| 3.                 | Estimate and list monthly overt  | ime pay.                      |  | 3.                     | +\$         | 0.00                          | +\$                      | N/A                          |                 |
| 4.                 | Calculate gross Income. Add lin  | ne 2 + line 3.                |  | 4.                     | \$          | 0.00                          | \$                       | N/A                          |                 |

# Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 24 of 48

| Debt | or 1          | Javier Godinez   | -              | C          | Case        | number (if known) | _ |      |                    |                   |                  |
|------|---------------|--|----------------|------------|-------------|-------------------|---|------|--------------------|-------------------|------------------|
|      |               |  |                |            |             | Debtor 1          |   | non- | Debtor<br>filing s | pouse             |                  |
|      | Cop           | by line 4 here   | 4.             |            | \$_         | 0.00              |   | \$   |                    | N/A               | <u> </u>         |
| 5.   | List          | all payroll deductions:  |                |            |             |                   |   |      |                    |                   |                  |
|      | 5a.           | Tax, Medicare, and Social Security deductions  | 5a             | <b>a</b> . | \$          | 0.00              |   | \$   |                    | N/A               |                  |
|      | 5b.           | Mandatory contributions for retirement plans   | 5b             | ).         | \$          | 0.00              |   | \$   |                    | N/A               | _                |
|      | 5c.           | Voluntary contributions for retirement plans   | 50             |            | \$          | 0.00              |   | \$   |                    | N/A               | _                |
|      | 5d.           | Required repayments of retirement fund loans   | 50             | 1.         | \$          | 0.00              |   | \$   |                    | N/A               |                  |
|      | 5e.           | Insurance  | 5e             |            | \$          | 0.00              |   | \$   |                    | N/A               | _                |
|      | 5f.           | Domestic support obligations   | 5f.            |            | \$<br>\$    | 0.00              |   | \$   |                    | N/A               | _                |
|      | 5g.<br>5h.    | Union dues Other deductions. Specify:  | 5g             |            | \$<br>_     | 0.00              | _ | \$   |                    | N/A<br>N/A        |                  |
| _    |               |  | _              |            | · —         |                   | _ |      |                    |                   | _                |
| 6.   |               | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.             |            | \$          | 0.00              |   | \$   |                    | N/A               | _                |
| 7.   | Cal           | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.             |            | \$          | 0.00              |   | \$   |                    | N/A               | <u> </u>         |
| 8.   | List<br>8a.   | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.                      | 8a             | a.         | \$          | 2,134.00          |   | \$   |                    | N/A               |                  |
|      | 8b.           | Interest and dividends   | 8b             | ).         | \$          | 0.00              |   | \$   |                    | N/A               |                  |
|      | 8c.           | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 80             | <b>)</b> . | \$          | 0.00              |   | \$   |                    | N/A               |                  |
|      | 8d.           | Unemployment compensation  | 80             | ı.         | \$          | 0.00              |   | \$   |                    | N/A               |                  |
|      | 8e.           | Social Security  | 86             | €.         | \$          | 0.00              |   | \$   |                    | N/A               |                  |
|      | 8f.<br>8g.    | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income | e<br>8f.<br>8g |            | \$_<br>\$   | 0.00              |   | \$   |                    | N/A<br>N/A        |                  |
|      | 8h.           | Other monthly income. Specify:   | _              | ,          | <u>\$</u> — | 0.00              | + |      |                    | N/A               | _                |
|      |               |  |                | _          |             |                   |   |      |                    |                   | _                |
| 9.   | Add           | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.             | \$         |             | 2,134.00          |   | \$   |                    | N/                | A                |
| 10.  | Cal           | culate monthly income. Add line 7 + line 9.  | 10.            | \$         |             | 2,134.00 + \$     |   |      | N/A                | = \$              | 2,134.00         |
|      |               | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   |                | -          |             | 2,104.00          |   |      | 14//               | * -               | 2,104.00         |
| 11.  | Stat<br>Incli | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a                                | depe           |            |             |                   |   |      |                    | <i>J</i> .<br>+\$ | 0.00             |
| 12.  |               | I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies  |                |            |             |                   |   |      | 12.                | \$                | 2,134.00         |
| 13.  | Do            | you expect an increase or decrease within the year after you file this form  | ?              |            |             |                   |   |      | •                  | Combi<br>month    | ned<br>ly income |
|      |               | No.  |                |            |             |                   |   |      |                    |                   |                  |
|      | $\Box$        | Voc Evoloin:   |                |            |             |                   |   | -    |                    |                   |                  |

#### Income

| August   | September         | October      | November   | December   | Janruary   |
|----------|-------------------|--------------|------------|--|------------|
|          |                   |              |            |  |            |
| \$100.00 | \$2,406.86        | \$2,688.74   | \$2,148.42 | \$3,148.49   | \$4,952.55 |
| •        |                   |              |            | Astron   |            |
|          | Average Mor       | nthly Income | \$2,574.18 |  |            |
|          |                   |              |            |  |            |
| _        | Monthly Expe      | enses        |            |  |            |
|          |                   |              |            |  |            |
|          | <del>-</del> +    |              |            |  |            |
|          | Phone             | \$120.00     |            | The second secon |            |
| Meals    | and Entertainment | \$315.00     |            |  |            |
| _        | Banking fees      | \$5.00       |            |  |            |
|          |                   | \$440.00     |            |  |            |
|          |                   |              | *          |  |            |

Average Monthly Income

**Average Monthly Expenses** 

**Average Net Monthly Income** 

\$2,574.18

\$440.00

\$2,134.18

Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 26 of 48

| Filli       | in this informa             | tion to identify yo                  | ur case:     |   |   | I                |                   |                               |
|-------------|-----------------------------|--------------------------------------|--------------|---|---|------------------|-------------------|-------------------------------|
| Debt        |                             | Javier Godin                         |              |   |   |                  | c if this is:     |                               |
| Debt        | tor 2                       |                                      |              |   |   |                  |                   | ving postpetition chapter     |
| (Spo        | ouse, if filing)            |                                      |              |   |   | 1                | 13 expenses as of | the following date:           |
| Unite       | ed States Bankr             | uptcy Court for the:                 | NORTH        | HERN DISTRICT OF ILLIN  | OIS                                     | 1                | MM / DD / YYYY    |                               |
|             | e number<br>nown)           |                                      |              |   |   |                  |                   |                               |
| Of          | ficial Fo                   | rm 106J                              |              |   |   |                  |                   |                               |
|             |                             | J: Your E                            |              |   |   |                  |                   | 12/15                         |
| info        | rmation. If m               |                                      | eded, atta   | . If two married people ar<br>ach another sheet to this<br>n.               |   |                  |                   |                               |
| Part        |                             | ibe Your House                       | hold         |   |   |                  |                   |                               |
| 1.          | Is this a join  No. Go to   |                                      |              |   |   |                  |                   |                               |
|             |                             |                                      | n a separ    | ate household?  |   |                  |                   |                               |
|             | □ N                         | 0                                    | -            |   |   |                  |                   |                               |
|             | □ Ye                        | es. Debtor 2 mus                     | t file Offic | ial Form 106J-2, <i>Expense</i> s   | for Separate House                      | ehold of Debto   | or 2.             |                               |
| 2.          | Do you have                 | e dependents?                        | □ No         |   |   |                  |                   |                               |
|             | Do not list De<br>Debtor 2. | ebtor 1 and                          | Yes.         | Fill out this information for each dependent                                | Dependent's relation Debtor 1 or Debtor |                  | Dependent's age   | Does dependent live with you? |
|             | Do not state                |                                      |              |   |   |                  | _                 | □ No                          |
|             | dependents                  | names.                               |              |   | Son                                     |                  | 5                 | ■ Yes<br>□ No                 |
|             |                             |                                      |              |   | Daughter                                |                  | 7                 | ■ Yes                         |
|             |                             |                                      |              |   |   |                  |                   | □No                           |
|             |                             |                                      |              |   |   |                  |                   | Yes                           |
|             |                             |                                      |              |   |   |                  |                   | □ No<br>□ Yes                 |
| 3.          | Do your exp                 | enses include                        |              | l No  |   |                  |                   | □ Yes                         |
|             | expenses of                 | f people other th                    | nan _        | l Yes   |   |                  |                   |                               |
|             | yourself and                | d your depender                      | nts? —       | . 100   |   |                  |                   |                               |
| Esti<br>exp | imate your ex               |                                      | ur bankr     | ly Expenses<br>uptcy filing date unless y<br>cy is filed. If this is a supp |   |                  |                   |                               |
| the         |                             | n assistance and                     |              | government assistance i   |   |                  | Your exp          | enses                         |
| (011        | iciai Folili 10             | 01.)                                 |              |   |   |                  |                   |                               |
| 4.          |                             | r home ownershid any rent for the    |              | nses for your residence. In<br>or lot.                                      | nclude first mortgage                   | e<br>4. \$       |                   | 1,000.00                      |
|             | If not includ               | ed in line 4:                        |              |   |   |                  |                   |                               |
|             | 4a. Real e                  | state taxes                          |              |   |   | 4a. \$           |                   | 0.00                          |
|             |                             | rty, homeowner's                     |              |   |   | 4b. \$           |                   | 0.00                          |
|             |                             | maintenance, re<br>owner's associati |              | upkeep expenses<br>dominium dues  |   | 4c. \$<br>4d. \$ |                   | 0.00                          |
| 5.          |                             |                                      |              | our residence, such as ho   | me equity loans                         | 4u. \$           | -                 | 0.00                          |

# Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 27 of 48

| btor 1             | avier Godinez   | Case num       | ber (if known) |                        |
|--------------------|---|----------------|----------------|------------------------|
| Utilities          | :   |                |                |                        |
|                    | lectricity, heat, natural gas   | 6a.            | \$             | 0.00                   |
|                    | /ater, sewer, garbage collection  | 6b.            | \$             | 0.00                   |
|                    | elephone, cell phone, Internet, satellite, and cable services   | 6c.            |                | 70.00                  |
|                    | ther. Specify:  | 6d.            | ·              | 0.00                   |
|                    | nd housekeeping supplies  | 7.             | ·              | 250.00                 |
|                    | re and children's education costs   | 7.<br>8.       | \$             |                        |
|                    |   |                | ·              | 0.00                   |
|                    | g, laundry, and dry cleaning  | 9.             | · -            | 113.00                 |
|                    | al care products and services   | 10.            | ·              | 25.00                  |
|                    | l and dental expenses   | 11.            | \$             | 10.00                  |
|                    | ortation. Include gas, maintenance, bus or train fare.  | 12.            | ¢              | 140.00                 |
|                    | nclude car payments.  |                | ·              |                        |
|                    | inment, clubs, recreation, newspapers, magazines, and books   | 13.            | \$             | 0.00                   |
|                    | ble contributions and religious donations   | 14.            | \$             | 0.00                   |
| 5. <b>Insuran</b>  |   |                |                |                        |
|                    | nclude insurance deducted from your pay or included in lines 4 or 20.                                 | 45-            | Φ.             |                        |
|                    | fe insurance  | 15a.           |                | 0.00                   |
|                    | ealth insurance   | 15b.           | *              | 0.00                   |
| 15c. V             | ehicle insurance  | 15c.           | · -            | 120.00                 |
| 15d. O             | ther insurance. Specify:  | 15d.           | \$             | 0.00                   |
|                    | Do not include taxes deducted from your pay or included in lines 4 or 20.                             |                |                |                        |
| Specify:           |   | 16.            | \$             | 0.00                   |
|                    | nent or lease payments:   |                |                |                        |
| 17a. C             | ar payments for Vehicle 1   | 17a.           | ·              | 0.00                   |
| 17b. C             | ar payments for Vehicle 2   | 17b.           | \$             | 0.00                   |
| 17c. O             | ther. Specify:  | 17c.           | \$             | 0.00                   |
| 17d. O             | ther. Specify:  | 17d.           | \$             | 0.00                   |
|                    | syments of alimony, maintenance, and support that you did not repor                                   | t as           | · -            |                        |
|                    | ed from your pay on line 5, Schedule I, Your Income (Official Form 10                                 |                | \$             | 0.00                   |
|                    | ayments you make to support others who do not live with you.  | •              | \$             | 0.00                   |
| Specify:           |   | 19.            |                |                        |
| 0. Other re        | eal property expenses not included in lines 4 or 5 of this form or on 5                               | Schedule I: Yo | our Income.    |                        |
|                    | lortgages on other property   | 20a.           |                | 0.00                   |
| 20b. R             | eal estate taxes  | 20b.           | \$             | 0.00                   |
|                    | roperty, homeowner's, or renter's insurance   | 20c.           | ·              | 0.00                   |
|                    | laintenance, repair, and upkeep expenses  | 20d.           | ·              | 0.00                   |
|                    | omeowner's association or condominium dues  | 20e.           | ·              | 0.00                   |
|                    |   |                | ·              |                        |
| 1. <b>Other:</b> § | Specify:  | 21.            | +\$            | 0.00                   |
| 2. Calcula         | te your monthly expenses  |                |                |                        |
|                    | d lines 4 through 21.   |                | \$             | 1,728.00               |
|                    | py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106                            | I-2            | \$             | 1,1 20.00              |
|                    | ,, ,,   |                | Ψ              | 4 700 00               |
| ∠∠C. Add           | d line 22a and 22b. The result is your monthly expenses.  |                | \$             | 1,728.00               |
| 3. Calcula         | te your monthly net income.   |                | 1              |                        |
|                    | opy line 12 (your combined monthly income) from Schedule I.   | 23a.           | \$             | 2,134.00               |
|                    | opy your monthly expenses from line 22c above.  | 23b.           | ·              | 1,728.00               |
| 25D. C             | opy your monthly expenses from the ZZC above.   | 230.           |                | 1,720.00               |
| 23° C              | ubtract your monthly expenses from your monthly income.   |                |                |                        |
|                    | ubtract your monthly expenses from your monthly income. he result is your <i>monthly net income</i> . | 23c.           | \$             | 406.00                 |
|                    | expect an increase or decrease in your expenses within the year after                                 |                |                |                        |
|                    | ple, do you expect to finish paying for your car loan within the year are                             |                |                | or decrease because of |
|                    | ion to the terms of your mortgage?  | , , ,          | ,              | 2. 200.0000 booddoo (  |
| _                  | , , ,   |                |                |                        |
| ■ No.              |   |                |                |                        |

# Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 28 of 48

| Fill in this infor  | mation to identify your                          | case:                     |                             |                         |   |
|---|--|---------------------------|-----------------------------|-------------------------|---|
| Debtor 1  | Javier Godinez                                   |                           |                             |                         |   |
|   | First Name                                       | Middle Name               | Last Name                   |                         |   |
| Debtor 2<br>(Spouse if, filing)                           | First Name                                       | Middle Name               | Last Name                   |                         |   |
| United States Ba  | inkruptcy Court for the:                         | NORTHERN DISTRICT         | OF ILLINOIS                 |                         |   |
| Case number _ (if known)                                  |  |                           |                             |                         | ☐ Check if this is an amended filing                                    |
| Official Forr<br><b>Declarat</b>                          | -  | ın Individual             | Debtor's Sc                 | hedules                 | 12/15   |
| You must file thi<br>obtaining money<br>years, or both. 1 | s form whenever you fi                           | n connection with a bank  | or amended schedules.       | Making a false state    | ment, concealing property, or<br>), or imprisonment for up to 20        |
| Did you pa  | y or agree to pay some                           | one who is NOT an attorr  | ney to help you fill out ba | ankruptcy forms?        |   |
| ■ No  |  |                           |                             |                         |   |
| ☐ Yes. N  | Name of person                                   |                           |                             |                         | ruptcy Petition Preparer's Notice,<br>and Signature (Official Form 119) |
|   | Ity of perjury, I declare<br>e true and correct. | that I have read the sumr | mary and schedules filed    | d with this declaration | n and   |
| X /s/ Jav   | ier Godinez                                      |                           | X                           |                         |   |
| Javier  | Godinez  |                           | Signature of I              | Debtor 2                |   |

Date

Signature of Debtor 1

Date **February 28, 2017** 

# Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 29 of 48

| Fill        | in this inform           | nation to identify you                       | r case:                                    |   |  |   |
|-------------|--------------------------|--|--|---|--|---|
|             | tor 1                    | Javier Godinez                               |  |   |  |   |
|             |                          | First Name                                   | Middle Name                                | Last Name   |  |   |
|             | tor 2<br>use if, filing) | First Name                                   | Middle Name                                | Last Name   |  |   |
| Unit        | ed States Bar            | nkruptcy Court for the:                      | NORTHERN DISTRICT                          | OF ILLINOIS   |  |   |
| Coo         | e number                 |  |  |   |  |   |
| (if kno     | _                        |  |  |   |  | Check if this is an mended filing                     |
| Sta<br>Be a | s complete a             | of Financial                                 | ible. If two married people                |   | equally responsible for sup                                    |   |
|             |                          | ore space is needed,<br>a). Answer every que |  | this form. On the top of an   | y additional pages, write yo।                                  | ır name and case                                      |
| Part        | 1: Give D                | etails About Your Ma                         | arital Status and Where You                | Lived Before  |  |   |
| 1.          | What is your             | current marital statu                        | ıs?  |   |  |   |
|             | ■ Married □ Not mar      | ried   |  |   |  |   |
| 2.          | During the la            | ıst 3 years, have you                        | lived anywhere other than                  | where you live now?   |  |   |
|             | ■ No<br>□ Yes. List      | t all of the places you l                    | ived in the last 3 years. Do n             | ot include where you live now   | <i>'</i> .   |   |
|             | Debtor 1 Pri             | or Address:                                  | Dates Debtor 1 lived there                 | Debtor 2 Prior Ad   | dress:   | Dates Debtor 2<br>lived there                         |
|             |                          |  |  |   | ity property state or territory<br>co, Texas, Washington and W |   |
|             | ■ No<br>□ Yes. Ma        | ke sure you fill out <i>Scl</i>              | hedule H: Your Codebtors (O                | fficial Form 106H).   |  |   |
| Part        | Explain                  | n the Sources of You                         | r Income                                   |   |  |   |
|             | Fill in the tota         | I amount of income yo                        | u received from all jobs and               | ng a business during this yeall businesses, including partetogether, list it only once ur |  | ndar years?   |
|             | □ No                     |  |  |   |  |   |
|             | Yes. Fill                | in the details.                              |  |   |  |   |
|             |                          |  | Debtor 1                                   |   | Debtor 2   |   |
|             |                          |  | Sources of income<br>Check all that apply. | Gross income<br>(before deductions and<br>exclusions)                                     | Sources of income<br>Check all that apply.                     | Gross income<br>(before deductions<br>and exclusions) |
|             |                          | of current year until<br>d for bankruptcy:   | ☐ Wages, commissions, bonuses, tips        | \$4,167.00  | ☐ Wages, commissions, bonuses, tips                            |   |
|             |                          |  | Operating a business                       |   | ☐ Operating a business   |   |

Official Form 107

Page 30 of 48
Case number (if known) Document Debtor 1 Javier Godinez

|    |                                |                                      |  | Debtor 1  |   | Debtor 2  |                                   |   |
|----|--------------------------------|--------------------------------------|--|---|---|---|-----------------------------------|---|
|    |                                |                                      |  | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions)   | Sources of inco   |                                   | Gross income<br>(before deductions<br>and exclusions) |
|    | or last caler<br>anuary 1 to   | ndar year:<br>December               | 31, 2016 )   | ☐ Wages, commissions, bonuses, tips   | \$20,600.00   | ☐ Wages, common bonuses, tips                                       | nissions,                         |   |
|    |                                |                                      |  | Operating a business  |   | Operating a b   | usiness                           |   |
|    |                                | dar year be<br>December              |  | ☐ Wages, commissions, bonuses, tips   | \$10,609.00   | ☐ Wages, common bonuses, tips                                       | nissions,                         |   |
|    |                                |                                      |  | Operating a business  |   | Operating a b   | usiness                           |   |
|    | and other winnings.  List each | public bene<br>If you are fil        | fit payments;<br>ing a joint cas<br>the gross inco   | er that income is taxable. Exa<br>pensions; rental income; inter<br>le and you have income that y<br>ome from each source separat | est; dividends; money collector received together, list it o  | ted from lawsuits; renly once under Del                             | oyalties; and<br>otor 1.          |   |
|    |                                |                                      |  |   |   |   |                                   |   |
|    |                                |                                      |  | Debtor 1 Sources of income Describe below.  | Gross income from each source (before deductions and exclusions)  | Debtor 2 Sources of inco Describe below.                            | me                                | Gross income<br>(before deductions<br>and exclusions) |
| Pa | rt 3: Lis                      | t Certain Pa                         | yments You   | Made Before You Filed for I   | Bankruptcy  |   |                                   |   |
| 6. | Are eithe ☐ No.                | Neither De individual puring the No. | ebtor 1 nor Deprimarily for a 90 days before Go to line 7 List below 6 paid that cruot include | each creditor to whom you pair<br>editor. Do not include paymen<br>payments to an attorney for th                                 | Imer debts. Consumer debts d purpose."  d you pay any creditor a total d a total of \$6,425* or more into for domestic support obligations bankruptcy case. | l of \$6,425* or more<br>n one or more payr<br>ations, such as chil | e?<br>nents and th<br>d support a | ne total amount you<br>nd alimony. Also, do           |
|    | ■ Yes.                         | •                                    | •  | on 4/01/19 and every 3 years r both have primarily consu  |   | or after the date of  | adjustment                        |   |
|    |                                |                                      |  | re you filed for bankruptcy, die  |   | of \$600 or more?   |                                   |   |
|    |                                | No.                                  | Go to line 7   |   |   |   |                                   |   |
|    |                                | □ <sub>Yes</sub>                     | include pay  | each creditor to whom you pai<br>ments for domestic support of<br>this bankruptcy case.   |   |   |                                   |   |
|    | Creditor                       | 's Name and                          | d Address  | Dates of payme  | nt Total amount   | Amount you  | Was this p                        | payment for   |

Page 31 of 48
Case number (if known) Debtor 1 Javier Godinez

| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one fo a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.  No  No  Yes List all payments to an insider |   |                     |                      |                   |                                   |  |  |  |
|-----|--|---|---------------------|----------------------|-------------------|-----------------------------------|--|--|--|
|     | ☐ Yes. List all payments to an insider.  |   |                     |                      |                   |                                   |  |  |  |
|     | Insider's Name and Address   | Dates of payment  | Total amount paid   | Amount you still owe | Reason for the    | is payment                        |  |  |  |
| 8.  | Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cost  |   | ments or transfer a | ny property on a     | ccount of a debt  | that benefited an                 |  |  |  |
|     | ☐ Yes. List all payments to an insider   |   |                     |                      |                   |                                   |  |  |  |
|     | Insider's Name and Address   | Dates of payment  | Total amount paid   | Amount you still owe | Reason for the    |                                   |  |  |  |
| Pa  | rt 4: Identify Legal Actions, Repossession   | s, and Foreclosures   |                     |                      |                   |                                   |  |  |  |
| 9.  | Within 1 year before you filed for bankrupto<br>List all such matters, including personal injury<br>modifications, and contract disputes.  |   |                     |                      |                   |                                   |  |  |  |
|     | <ul><li>No</li><li>Yes. Fill in the details.</li></ul>   |   |                     |                      |                   |                                   |  |  |  |
|     | Case title Case number   | Nature of the case  | Court or agency     |                      | Status of the     | case                              |  |  |  |
|     | Daisy Avila vs. Javier Godinez<br>2016D62  | aisy Avila vs. Javier Godinez Dissolution of Circuit Court of Boone |                     |                      |                   | ■ Pending □ On appeal □ Concluded |  |  |  |
| 10. | Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below.  ■ No. Go to line 11.  □ Yes. Fill in the information below.  |   | rty repossessed, fo | oreclosed, garnis    | hed, attached, s  | seized, or levied?                |  |  |  |
|     | Creditor Name and Address  | Describe the Property   |                     | Date                 |                   | Value of the property             |  |  |  |
|     |  | Explain what happened   |                     |                      |                   | p. 0 p ,                          |  |  |  |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec.  ■ No □ Yes. Fill in the details.  |   | uding a bank or fin | nancial institution  | , set off any am  | ounts from your                   |  |  |  |
|     | Creditor Name and Address  | Describe the action the   | creditor took       | Date<br>taken        | action was        | Amount                            |  |  |  |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a  No Yes   |   | rty in the possessi | on of an assigne     | e for the benefit | of creditors, a                   |  |  |  |

Debtor 1 Javier Godinez

Document Page 32 of 48

Case number (if known)

| Par | t 5: List Certain Gifts and Contributions   |   |                                   |                           |
|-----|---|---|-----------------------------------|---------------------------|
| 13. | Within 2 years before you filed for bankrupto  No  Yes. Fill in the details for each gift.  | y, did you give any gifts with a total value of more t  | han \$600 per person              | ?                         |
|     | Gifts with a total value of more than \$600 per person  | Describe the gifts  | Dates you gave the gifts          | Value                     |
|     | Person to Whom You Gave the Gift and Address:   |   |                                   |                           |
| 14. | ■ No  | y, did you give any gifts or contributions with a tota  | al value of more than             | \$600 to any charity?     |
|     | ☐ Yes. Fill in the details for each gift or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | Describe what you contributed   | Dates you contributed             | Value                     |
| Par | t 6: List Certain Losses  |   |                                   |                           |
| 15. | Within 1 year before you filed for bankruptcy or gambling?  No Yes. Fill in the details.  | or since you filed for bankruptcy, did you lose any   | thing because of the              | it, fire, other disaster, |
|     | how the loss occurred Incl  | scribe any insurance coverage for the loss ude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property. | Date of your loss                 | Value of property<br>lost |
| Par | t 7: List Certain Payments or Transfers   |   |                                   |                           |
| 16. | consulted about seeking bankruptcy or prep  | , did you or anyone else acting on your behalf pay of aring a bankruptcy petition?  Irers, or credit counseling agencies for services requires      |                                   | rty to anyone you         |
|     | Yes. Fill in the details.   |   |                                   |                           |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not You   | Description and value of any property transferred   | Date payment or transfer was made | Amount of payment         |
|     | Law Offices of Joseph P. Doyle<br>105 S. Roselle Rd.<br>Suite 203<br>Schaumburg, IL 60193   | \$0.00 out of \$4,000.00  | 2017                              | \$0.00                    |
| 17. | Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you                          |   | or transfer any prope             | rty to anyone who         |
|     | ■ No □ Yes. Fill in the details.  |   |                                   |                           |
|     | Person Who Was Paid Address   | Description and value of any property transferred   | Date payment or transfer was made | Amount of payment         |

Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Case 17-80446 Page 33 of 48
Case number (if known) Document

Debtor 1 Javier Godinez

| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No |   |                 |                       |   |   |  |  |  |  |  |
|-----|---|---|-----------------|-----------------------|---|---|--|--|--|--|--|
|     | Yes. Fill in the details.   |   |                 |                       |   |   |  |  |  |  |  |
|     | Person Who Received Transfer Address  | Description and v   |                 | payme                 | ibe any property or<br>ents received or debts<br>n exchange | Date transfer was made                        |  |  |  |  |  |
|     | Person's relationship to you  |   |                 |                       |   |   |  |  |  |  |  |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)   |   |                 |                       |   |   |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |                 |                       |   |   |  |  |  |  |  |
|     | Name of trust   | Description and v   | alue of the pro | perty trans           | ferred  | Date Transfer was made                        |  |  |  |  |  |
| Par | t 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units   |   |                 |                       |   |   |  |  |  |  |  |
|     |   |   |                 |                       |   |   |  |  |  |  |  |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  |   |                 |                       |   |   |  |  |  |  |  |
|     | Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No   |   |                 |                       |   |   |  |  |  |  |  |
|     | _   |   |                 |                       |   |   |  |  |  |  |  |
|     |   |   |                 |                       |   |   |  |  |  |  |  |
|     | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  | Last 4 digits of Type of account number instrum   |                 | unt or                | Date account was closed, sold, moved, or transferred        | Last balance<br>before closing or<br>transfer |  |  |  |  |  |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  |   |                 |                       |   |   |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |                 |                       |   |   |  |  |  |  |  |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had access to it? Address (Number, Street, City, State and ZIP Code)                 |                 | Describe the contents |   | Do you still have it?                         |  |  |  |  |  |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?   |   |                 |                       |   |   |  |  |  |  |  |
|     | ■ No  |   |                 |                       |   |   |  |  |  |  |  |
|     | Yes. Fill in the details.   |   |                 |                       |   |   |  |  |  |  |  |
|     |   | Who also has an I   |                 | Dagarilaa             | the contoute  | De ven etill                                  |  |  |  |  |  |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or had access<br>to it?<br>Address (Number, Street, City,<br>State and ZIP Code) |                 | Describe the contents |   | Do you still have it?                         |  |  |  |  |  |
| Par | t 9: Identify Property You Hold or Control  | for Someone Else  |                 |                       |   |   |  |  |  |  |  |
| 23. | Do you hold or control any property that so for someone.  | omeone else owns? Inclu   | ude any proper  | ty you borr           | owed from, are storing f                                    | or, or hold in trust                          |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |                 |                       |   |   |  |  |  |  |  |
|     |   | VAIII 1 11  | t 2             | D                     | the many -t-  |   |  |  |  |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the prop<br>(Number, Street, City, S<br>Code)  |                 | Describe              | the property  | Value   |  |  |  |  |  |
| Par | tt 10: Give Details About Environmental Inf   | ormation  |                 |                       |   |   |  |  |  |  |  |
| For | the purpose of Part 10, the following definiti  | ons apply:  |                 |                       |   |   |  |  |  |  |  |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Entered 02/28/17 21:37:02 Desc Main Case 17-80446 Doc 1 Filed 02/28/17 Page 34 of 48 Case number (if known) Document

Debtor 1 **Javier Godinez** 

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

|     | hazardous material, pollutant, contaminant, or similar term.   |  |         |   |                    |  |  |  |  |  |  |
|-----|--|--|---------|---|--------------------|--|--|--|--|--|--|
| Rep | ort all notices, releases, and proceedings t   | hat you know about, regardless of wher                                     | they oc | curred.   |                    |  |  |  |  |  |  |
| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? |  |         |   |                    |  |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |         |   |                    |  |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) |         | rironmental law, if you<br>w it   | Date of notice     |  |  |  |  |  |  |
| 25. | ■ No   |  |         |   |                    |  |  |  |  |  |  |
|     | Yes. Fill in the details.  | the details.   |         |   |                    |  |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit Address (Number, Street, City, State and ZIP Code)       |         | rironmental law, if you<br>w it   | Date of notice     |  |  |  |  |  |  |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.    |  |         |   |                    |  |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |         |   |                    |  |  |  |  |  |  |
|     | Case Title Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature  | of the case   | Status of the case |  |  |  |  |  |  |
| Par | t11: Give Details About Your Business o  | r Connections to Any Business  |         |   |                    |  |  |  |  |  |  |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?   |  |         |   |                    |  |  |  |  |  |  |
|     | ■ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time                      |  |         |   |                    |  |  |  |  |  |  |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |  |         |   |                    |  |  |  |  |  |  |
|     | ☐ A partner in a partnership   |  |         |   |                    |  |  |  |  |  |  |
|     | ☐ An officer, director, or managing executive of a corporation   |  |         |   |                    |  |  |  |  |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation  |  |         |   |                    |  |  |  |  |  |  |
|     | □ No. None of the above applies. Go to Part 12.  |  |         |   |                    |  |  |  |  |  |  |
|     | Yes. Check all that apply above and fill in the details below for each business.   |  |         |   |                    |  |  |  |  |  |  |
|     | Business Name<br>Address<br>(Number, Street, City, State and ZIP Code)   | Describe the nature of the business  Name of accountant or bookkeeper      | Do      | Employer Identification number Do not include Social Security number or ITIN. |                    |  |  |  |  |  |  |
|     | Javier Godinez<br>1904 Carly Lane<br>Belvidere, IL 61008   | 04 Carly Lane contractor/trucker driver                                    |         | Dates business existed EIN: From-To 2014 to Current                           |                    |  |  |  |  |  |  |

Page 35 of 48 Case number (if known) Document Debtor 1 **Javier Godinez** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Javier Godinez Signature of Debtor 2 **Javier Godinez** Signature of Debtor 1 Date February 28, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Entered 02/28/17 21:37:02

Case 17-80446

Doc 1

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Filed 02/28/17

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing tee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

## Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

## A. BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

## THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

## D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

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- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.

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3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

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## F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: January 29, 2017

Signed:

Javier Godiner

oseph P. Doyle 6277393

Attorney for the Debtor(s)

Debtor(s)

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 46 of 48

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

|                          | 11021  |   | •  |  |  |
|--------------------------|--|---|--|--|--|
| In re                    | Javier Godinez   | Debtor(s)   | Case No.   | 13   |  |
|                          |  | Debtor(s)   | Chapter  |  |  |
|                          | DISCLOSURE OF COMPEN   | SATION OF ATTO  | RNEY FOR D   | EBTOR(S)   |  |
| c                        | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(1) compensation paid to me within one year before the filing the rendered on behalf of the debtor(s) in contemplation of  | g of the petition in bankruptcy   | , or agreed to be paid   | d to me, for service   |  |
|                          | For legal services, I have agreed to accept  |   | \$   | 4,000.00   |  |
|                          | Prior to the filing of this statement I have received  |   |  | 0.00   |  |
|                          | Balance Due  |   |  | 4,000.00   |  |
| 2. T                     | The source of the compensation paid to me was:   |   |  |  |  |
|                          | ■ Debtor □ Other (specify):  |   |  |  |  |
| 3. Т                     | The source of compensation to be paid to me is:  |   |  |  |  |
|                          | ■ Debtor □ Other (specify):  |   |  |  |  |
| 4. I                     | ■ I have not agreed to share the above-disclosed compe   | ensation with any other person  | unless they are mer  | nbers and associate  | es of my law firm.                       |
| 5. I<br>a<br>b<br>c<br>d | I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name of the return for the above-disclosed fee, I have agreed to remark a Analysis of the debtor's financial situation, and render a Preparation and filing of any petition, schedules, state a Representation of the debtor at the meeting of creditor and [Other provisions as needed]  Negotiations with secured creditors to represent a present and application agreements and application second mortgages on personal residence any other adversary proceeding.  By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any other | nes of the people sharing in the order legal service for all aspecting advice to the debtor in dement of affairs and plan which is and confirmation hearing, a educe to market value; exals as needed; preparation is or mechanic's liens, judicious not include the followin | e compensation is attempted to the bankruptcy termining whether to have be required; and any adjourned he emption planning and filing of advalicial lien avoidant g service: | case, including: ofile a petition in barings thereof; g; preparation are | eankruptcy; and filing of lings avoiding |
|                          |  | CERTIFICATION   |  |  |  |
|                          | certify that the foregoing is a complete statement of any ankruptcy proceeding.  |   | r payment to me for  | representation of t  | he debtor(s) in                          |
| Fe                       | ebruary 28, 2017   | /s/ Joseph P. Do  |  |  |  |
| Do                       | ate  | Joseph P. Doyle Signature of Attorn Law Office of Jo 105 S. Roselle R Schaumburg, IL 847-985-1100 Fi joe@fightbills.cc  | ey<br>seph P. Doyle LL<br>oad, Suite 203<br>60193<br>ax: 847-985-1126  | c  |  |

Case 17-80446 Doc 1 Filed 02/28/17 Entered 02/28/17 21:37:02 Desc Main Document Page 47 of 48

## United States Bankruptcy Court Northern District of Illinois

| In re | Javier Godinez                             |                                       | Case No.             |                         |
|-------|--|---------------------------------------|----------------------|-------------------------|
|       |  | Debtor(s)                             | Chapter 1            | 3                       |
|       | VE   | CRIFICATION OF CREDITOR I             | MATRIX               |                         |
|       |  | Number o                              | of Creditors:        | 6                       |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of cred | itors is true and co | rrect to the best of my |
| Date: | February 28, 2017                          | /s/ Javier Godinez<br>Javier Godinez  |                      |                         |

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Fingerhut 6250 Ridgewood Rd St Cloud, MN 56303

Guyer & Enichen, P.C. Adrian C. Phillips 2601 Reid Farm Road Rockford, IL 61114

Nissan Motor Acceptanc Po Box 660360 Dallas, TX 75266

Portfolio Recovery Po Box 41067 Norfolk, VA 23541

Refugio Avila 1904 Carly Lane Belvidere, IL 61008-9012